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ABSTRACT

This practicum was designed to enhance the parenting skills of drug-addicted recovering women (N=8) and to give opportunities for successful family experiences in a half-way house setting. A curriculum was developed, weekly group meetings were held, guest speakers were presented, mothers were assisted with individual problems, and the program was evaluated. The Walker Problem Behavior Identification Checklist and the Systematic Training for Effective Parenting Workshop were used. The recovering mothers were encouraged to view completion of activities and the parenting class as part of their extended recovery program, and were monitored by the addiction professionals and resident managers regarding their participation in the program. Family members residing outside the recovery houses and church members provided many wholesome activities for the families to join. They also provided equipment and funds for activities the mothers carried out on their own. The average number of assignments completed for mothers who were in the program for less than the 8-month implementation program was 78%; for women in the program for the entire implementation program the completion rate was 86%. Mothers participated in successful family experiences 89% of the time. The largest decrease in score on the Walker Program Behavior Identification Checklist was 12%. All of the women who completed an evaluation reported feelings of higher value as a parent. (LLL)

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Helping Dysfunctional Recovering Drug-Addicted Mothers to Build Healthy Families by Enhancing Parenting Skills and Providing Opportunities for Bonding

by

Nan Kelly Wilson

Cluster XXVII

A Practicum II Report Presented to the Ed.D. Program
in Early and Middle Childhood
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY

1991

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PRACTICUM APPROVAL SHEET

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This practicum report was submitted by Nan Kelly Wilson under the direction of the advisor listed below. It was submitted to the Ed. D. Program in Early and Middle Childhood and approved in partial fulfillment of the requirements for the degree of Doctor of Education at Nova University.

Approved:

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Date of Final Approval of Report

Richard Goldman, Ph. D.

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ABSTRACT

Helping Dysfunctional Recovering Drug-Addicted Mothers to Build Healthy Families by Enhancing Parenting Skills and Providing Opportunities for Bonding. Wilson, Nan K., 1991: Practicum Report, Nova University, Ed.D. Program in Early and Middle Childhood. Descriptors: Parenting/Drug-Addiction/Alcoholism/Dysfunctional Families/Residential/At Risk.

This practicum was designed to enhance the parenting skills of drug-addicted recovering women and to give opportunities for successful family experiences in a half-way house setting.

The writer developed a curriculum, led weekly group meetings, arranged for guest speakers, assisted mothers with individual problems, and administered an evaluation. The Walker Problem Behavior Identification Checklist (1983) and the Systematic Training for Effective Parenting Workshop (Dinkmeyer & McKay, 1989) were used.

Results were positive. Recovering mothers completed parenting course activities, participated in weekly family experiences to develop bonding, and reported feelings of higher value as parents. Children's scores on the Walker Problem Behavior Identification Checklist (1983) dropped.

The literature review did not reveal any programs designed specifically for drug-addicted recovery mothers.

CHAPTER I

INTRODUCTION

Description of the Community

The setting was two halfway houses for women recovering from cocaine and/or alcohol addiction. The houses were exceptional in that they were the only two of their kind in this area instituted specifically for recovering women to live with their young children during the fragile period after hospitalization. The houses were located in a large city in a progressive southern state with extensive drug-related problems.

At the time the proposal for this practicum was written, the houses had a total of 8 women living in them. These women had a total of 12 children among them. Of these 12 children, 5 children lived with their mothers in the houses. The other children were living with other relatives or were in the care of foster parents. There were 2 pregnant women living in one of the houses. Both were having their second child. The number of women in the houses changed as the women progressed in recovery. The women moved from the houses to independent living arrangements as their

recovery program permitted. The goal of the program was to give women a chance to rejoin the community after hospitalization but without the stress of living independently.

The two houses were developed as a ministry of a local Lutheran church. They were administered by a board of directors and two resident managers. Initial funding for the first house was through a large cash donation from a recovering drug addict who saw the need for this type of structured environment for women who were in the important period of recovery following hospitalization. The women were required to pay rent according to ability and to seek gainful employment or education. They also had to find appropriate schooling or day care for their children. The women were required to attend at least four Alcoholic Anonymous or Narcotics Anonymous meetings per week.

These women had an average length of sobriety of 6 months. The shortest length of sobriety was 1 month. The longest was 12 months. None of these women were currently married. Only one maintained contact with the father of her children.

The houses survived on a budget of $900 a month each, with rent as a major part of that budget. As

the women had to contribute from $100 to $200 a month and had to provide their own food, these women seldom had extra money. Sources of income for most of these women were various public assistance programs such as Aid to Families with Dependent Children (AFDC). Because of this lack of money, the quality of life that these mothers were able to provide for their children was not very good.

The houses were located in middle-class residential areas of the city. Each had four bedrooms and three bathrooms. Each had a garage apartment where the resident manager lived. Large, grassy yards providing good play areas for the children surrounded both houses. The houses were well-equipped with adequate cooking and laundry facilities. The women bought and prepared food for themselves and their children. They also did their own laundry and shared other housekeeping duties. The living rooms of both houses had televisions and large, comfortable sofas. These areas provided comfortable meeting areas for both groups of women.

The resident managers were women who were not recovering addicts themselves but who were interested in the field of drug abuse. Both held jobs of professional nature in the community and both were

members of the houses' sponsoring church. The resident managers were not paid but were provided with small living quarters. The resident managers and the members of the board met once a week to discuss the progress of the women's recoveries, financial concerns, and any other business-related aspects of running the houses.

Women were referred to these houses by addiction units of local hospitals and community assistance agencies. Women were accepted into the houses as room permitted and by their willingness to commit themselves to the Alcoholics Anonymous/Narcotics Anonymous 12-Step Program and the rules governing each house.

The writer was a public school teacher and doctoral student in education, whose interest in drug-abuse problems began with her work with at-risk middle-school students. The writer found that many of her students were affected by drug or alcohol-abuse problems in their homes. The writer had done some volunteer work at one of these houses where she was able to observe some of the problems these women were having in parenting their children.

CHAPTER II

STUDY OF THE PROBLEM

Problem Description

The women in these houses had been under the influence of drugs and/or alcohol for substantial periods of time. Some women were pregnant or gave birth while under the influence. Others started drug or alcohol abuse when their children were very young. Because these women were not in control of their situations, they had not formed healthy relationships with their children.

Some of the women did not know the appropriate foods, discipline, or play activities for their children. Some had been known to abuse their children either physically or psychologically. Some had shown destruction or deterioration in the relationship with their children. Some of the children had learning disabilities. Some of the children were experiencing developmental problems. Most of the women did not know how to help their children with these problems.

Problems between parents and children were handled by the house managers and by the women themselves. This approach did not seem to be working well. Some problems of the same nature were dealt with many times by different women over a period of time. Poorly-handled situations were often repeated. These women did not have good parenting skills and did not seem to be learning these skills effectively. These women were experiencing frustration in developing healthy nuclear families.

Problem Documentation

Documentation for this problem was gathered in several ways. Anecdotal documentation was found in journals kept by resident managers for a period of 8 weeks. These journals detailed the everyday struggles of the women and their children as they tried to live together as family units. The journals contained entries of serious problems including child abuse, sexual abuse, and inappropriate care and inappropriate caregivers. In some of these instances, the state agency for child-abuse affairs was called in. The children were taken from the mother and placed in foster care.

One journal entry mentioned that the children of one woman were in the care of a foster mother who was abusive. The natural mother had struggled with guilt over the situation, anger, and fear for her children's lives.

Another journal entry detailed the actions of one mother who displayed immature actions in the care of her child. This mother did not know appropriate discipline measures for her child or even appropriate conversation for mother and son.

Another journal entry told of a different kind of a problem. This mother was fairly appropriate in discipline but over-rewarded her child. This same mother had also been observed in episodes of "giving in" to her child's demands because, at the time, it was simply more convenient.

A general entry stated that most of the children were becoming curious about sex. The entry states that this was an important problem because many of the women were trying to deal with the issues of sexual abuse during their drug and alcohol abusing years.

One entry mentioned a woman who had overnight vistation of her infant only every other weekend. The entry mentioned that this woman seemed to need help in rebonding with this infant. This entry

mentioned that this woman was nervous, apprehensive, and overly protective of this infant. This woman was being required to attend parenting classes as part of the requirements set for her by her social worker to regain custody of her child.

Another entry mentioned one woman who rarely disciplined her own children herself. Instead, the resident manager or one of the other women stepped in to handle the discipline problems. In the few instances where she did do the disciplining, the woman was cold and harsh. One particular problem that developed in this situation was that the child had become attached to the resident manager doing the disciplining. The mother then resented the intrusion.

The resident manager also mentioned in her journal the television-viewing habits of both parents and children in this house. She noted that both parents and children seemed to have developed "television addiction." She mentioned her own belief that the mothers encouraged television watching as a means of not dealing with their children.

Another entry mentioned a woman who has resumed a relationship with her ex-husband who had repeatedly abused her. This entry noted that these women did not seem to think through their decisions nor the consequences for themselves and for their children.

One entry detailed the postponent of a decision one woman made about bringing her child into the halfway house from the care of relatives. The woman did not feel that she could adequately care for herself yet and was still frightened at the prospect of parenting.

Another tool used to document this problem was the administration of the Walker Problem Behavior Identification Checklist (1983). Using the checklist all of the women were asked to evaluate the behaviors of their children. The checklist rated the behaviors of children in the areas of acting out, withdrawalness, disturbed peer relations, and immaturity. The administrator's manual stated that any child scoring a total score of 60 points or higher should be referred for further testing and possible intervention therapy.

When evaluated by their mothers, all but one of the children were found to have scores which placed them in the category of needing further testing and possible intervention therapy. The overall average for children at both houses was 67 (see Table 1).

To contrast the perception the mothers had of their children's behaviors with perceptions that were probably more objective, the resident managers were also asked to evaluate the children using the checklist.

Table 1. Scores from the Walker Behavior Identification Checklist as Administered by Mothers

Child	Raw Score	Converted Scores	*Children Needing Intervention Therapy
A	34	75	*
B	36	84	*
C	28	68	*
D	10	49	*
E	12	59	*
	Average	67	

The evaluations done by the resident managers showed many areas of disturbed behavior. However, the overall scores, while still high, were not as high as those given by the mothers (see Table 2). The average score from these evaluators was 64. This score is still high, indicating the need for therapy for these children.

The Walker Problem Behavior Identification Checklist (1983) was chosen for this project for many reasons. The instrument was easy to use. This was important because many of the women using the checklist did not have strong academic skills. The behaviors listed on the instrument were simply stated. The instrument had

Table 2. Scores from the Walker Behavior Identification Checklist as Administered by Resident Managers

Child	Raw Score	Converted Score	*Children Needing Intervention Therapy
A	28	73	*
B	26	71	*
C	29	70	*
D	18	58	*
E	4	49	
	Average	64	

five areas of problem behavior. This gave the administrator an indication of what area the child was most disturbed. The instrument had scales for age groups from pre-kindergarten to sixth grade, which was important because the children in this project were of various ages from 3 months to 12 years.

Content, criterion, construct, factorial, and item validity had all been established for the Walker Checklist (1983) as well as high correlations between the administrations of the instrument by the teacher and the parent. Another consideration important to this project was the establishment that

this instrument was sensitive to the changes that intervention therapy produced on the subjects.

A deviation of scores from those administered by the resident managers was not strong, valid evidence of any particular occurrence, but the scores alone and as they contrasted each other did indicate problems. Together the scores from evaluations administered by the mothers and those evaluations by the resident managers indicated that the children of these recovering women did have behavior problems. In this project 5 of the 5 children showed indications of problem behavior when the instrument was used by the recovering mothers. When used by the resident managers, 4 of the 5 children indicated problem behavior. This number was not quite as high as the scores given to their children by the recovering mothers using the instrument. It, too, showed a high number of children with problem behavior.

There was other evidence of more global nature to document this problem. Locally, educational and medical professionals had concluded that 1 out of every 10 babies born at a local major hospital tested positive for cocaine. Sternlof (1989) noted that at least 600 and possibly as many as 1200 babies born at this local hospital in one year could have had drug-related

problems because of the mothers' drug use during pregnancy. The local county school board was in the process of conducting a study which was to contribute information to the development of a checklist of attributes that drug exposed children were likely to exhibit. Murphey (1990) noted that school officials believed that between 20% and 50% of the kindergarten and pre-kindergarten students had a drug-abuse related problem.

Nationally the problem was just as extensive as it was locally. It was estimated that more than 375,000 babies were born drug addicted each year. Goodman (1989) noted that these 375,000 addicted babies were found in a study which included 36 hospitals in the United States. The 375,000 babies were thought to be about 11% of all babies born in these hospitals.

More evidence of this problem had been reported. "Children Devastated by Crack" (1989) noted that prenatal drug abuse interfered with human characteristics. Addicted babies did develop lower to normal range intelligence but did not develop normal emotional feelings. "Children Devastated by Crack" (1989) noted that these babies grew into children who had difficulty relating to others and difficulty feeling love for their mothers or primary caregivers. These

children found it difficult to make friends and would probably continue to have difficulty in forming close human relationships. These children could have had a problematic time in building employment skills and would probably have unhappy or unproductive lives. Mothers might have found these children to be an emotional and financial hardship to raise.

The writer interviewed each of the women living in both these halfway houses. She asked each about her parenting practices, about the strengths and weaknesses of herself as a parent, and about the strengths and weaknesses of her children. The writer asked each if she thought her relationship with her children could be improved by attending a parenting class. Each woman talked about her strengths and weaknesses as a parent by listing an attribute she thought she had. Two listed gentleness. One listed patience. Three women listed the lack of patience as a problem. All women said they thought they could benefit from weekly parenting classes.

Causative Analysis

In order to understand the parenting problems of the recovering drug-addicted mother, the reader must first understand the drug addiction. Drug abuse in the

setting where this practicum took place was at an all-time high rate of incidence just as it was across the country. The introduction of "crack" cocaine to the drug-abusing society had complicated drug-abuse problems significantly.

Crack cocaine's effect is much faster, and the effect it has on the brain is much more devastating than any other popular illegal drug available today. When the abuser smokes crack cocaine or sniffs cocaine, the drugs produce a very strong euphoria in the abuser. With crack cocaine the euphoria is reached very fast. When the effect wears off, the abuser sinks into a deep depression very quickly. Most abusers then smoke or sniff more drugs to compensate for the deep depression. Crack cocaine produces addicts with the very first use in many cases.

Crack cocaine abusers are more susceptible to its addiction, not just because of the euphoric high it creates, but because it can be purchased from dealers on many major streets corners in lower-income residential areas. Many of these street corners are in housing projects or city slums. Another major draw to crack cocaine is that enough drug for one or two users can be purchased for as little as $10. This is the one

thing that makes the drug so attractive to low-income young women.

While addicted to cocaine, abusers become paranoid and extremely nervous. Abusers experience chest pain, chronic cough, severe depression, irritability, and memory lapses. Some abusers exhibit violent behavior. Crack cocaine is so addictive that abusers' lives often revolve around supporting their addiction.

Women who are addicted to cocaine or crack cocaine often lose the reality of everyday life. When they lose reality, families, particularly children, suffer from neglect and abuse. Nuclear families disintegrate. With many Black and Hispanic women, the drug addiction compounds problems of poverty. Many women begin their drug abuse as a mental escape from a reality they find too harsh to endure.

Problems affecting poor people are traditionally problems of Blacks and many Hispanics. Over the years federal, state, and local programs have been developed to cope with these problems. Cocaine and particularly crack cocaine problems are new to this society. Few programs have been developed to deal with the extensive and pervasive problems these drugs produce.

Crack cocaine's mainstream use began in epidemic proportions in 1985. Little is known about the long-term effects that this epidemic will present to this society.

Women recovering from cocaine or crack addiction were often so overwhelmed with the problems of their recovery that they found themselves unable to care for their children. Most had lost their jobs and their homes. Children had often been cared for by relatives or placed in state foster care.

There were not enough recovery programs for abusers in this country because most state and federal monies went to drug law enforcement. There was also little research being done at the time of this writing due to lack of funding.

Relationship of the Problem to the Literature

A review of the literature related directly to the problems of mothers recovering from cocaine addiction yielded very little. A review of the literature in areas closely related to this problem was more fruitful.

Issues in Working With Addicts and Their Families

Householder, Hatcher, Burns, and Chasnoff (1982) found that reliable studies are difficult to undertake because few chemically-dependent women are addicted to one drug. The majority of abusing women abuse tobacco, alcohol, caffeine, prescription and "over the counter" medicines, cocaine, "crack" cocaine, phencyclidine, amphetamines, and marijuana in some combination. Householder et al. (1982) also found that drug abuse places a woman as a high risk as a good parent. They also found that infants born to addicted women show significant medical problems, impaired interactive behavior in early infancy, and some psychomotor problems. Householder et al. (1982) concluded that children of substance-abusing women show more frequent disturbances in activity level, attention span problems, sleep disorders, and problems in socialization.

Weitzman (1985) concluded that the strongly dysfunctional family did not respond to the more traditional techniques of family therapy. Weitzman's (1985) work with families experiencing incidences of violence, drug abuse, incest, and other serious problems found that the therapist should be sensitive to symptom relief and to the attainment of a positive

working relationship with the family. These families tended to be overwhelmed with aspects related to parenting and family life. In many cases it was noted that adolescent children were the complete caretakers of younger children. Weitzman (1985) also found that parents abusing drugs were often stagnating in earlier stages of emotional development with no realistic hope for caring for their own families effectively. To cope with these dysfunctional families, the author stressed that the therapist help the family to organize themselves, help the family to anticipate the impact of planned interventions, help the family to develop realistic goals, and help the family to define problems in terms of the life cycle and the developmental aspects of human life.

Developmental and Learning Theories

Erikson (1950) identified eight stages of psychosocial development which include the entire life cycle from birth to old age. Each stage of Erikson's psychosocial theory identifies a basic struggle that an individual faces and a quality or strength which the struggle produces in the individual.

Piaget (in Skolnick, 1986) theorized the development of intelligence in infants which includes six stages of sensorimotor development. These six stages start at birth and conclude when the infant is 18 of 24 months old.

Bandura (in Skolnick, 1986) theorized that children learn by modeling others. Bandura also felt that children respond to reinforcement when they do model the behavior of others and that the reinforcement encourages children to continue to model others.

Bruner (1973) found that when working with disadvantaged subculture children, the teacher should examine whether difficulties in learning stem from true intellectual deficit or from the status of the child's subculture in the opinion of the teacher. Bruner (1973) also found that when working with disadvantaged subculture children, the teacher should begin the educational task by focusing on the skills the child has already assimilated and by encouraging the child to transfer those same skills to new tasks.

The works of Erikson, Piaget, Bandura, and Bruner give the professional working with addicted women and their children ideals for normal development. These

families exhibit problems in varying degrees in psychosocial, sensorimotor, and learning development. One of the tragedies of drug and alcohol addiction is the manner and degree to which normal development in these areas is interrupted.

Issues of Addiction

Gibson, Wermuth, Sorensen, Menicucci, and Bernal (1987) examined the relationship between approval need and addicts' and family members' reports of individual and family functioning. They found that family members of drug addicts were more likely to exaggerate their own and their families' positive qualities, and addicts themselves were more likely to deny negative aspects about themselves and their families. Gibson et al. (1987) concluded that their results demonstrate the importance of taking approval needs into account when conducting research with drug abusers and their families.

Emmelkamp and Heeres (1988) found that the lack of emotional warmth and rejection by the father are two dimensions that are most associated with drug addiction. Emmelkamp and Heeres (1988) felt that this study had implications for the further evaluation of the parenting practices of the parents of drug addicts.

Erickson and Egeland (1987) found that maltreating mothers seemed to lack a sound understanding of child development. These mothers were found to believe that normal behaviors of the toddler were misbehaviors. Consequently, these mothers abused their children.

Swardi (1988) found that family and peers influence adolescents in their use of illegal drugs. Peer influence was found to be more important to the adolescent than family influence. This article raises a question about the validity of parent groups or parent drug-education classes operating without an adjunct group for the drug user and his or her peers.

Williams (1985) reported that the effect of alcoholism on a man or woman's ability to parent is an extremely important aspect of drug-abuse study but that it is also a neglected area of study. Williams (1985) also reported that in the alcoholic family, factors most important to the development of competent, well-adjusted children and adults are positive parent-child relationships, stability of home life, meeting of physical needs, consistent methods of rewards, appropriate discipline, and feelings of trust. Williams (1985) reported that alcoholic parents need to learn to parent and that parenting

skills can be learned through various parenting programs, especially those which stress the clarification of family roles, expectations, responsibilities, and communication in the healthy family. Williams (1985) noted that parenting skills are often not included in alcoholism-recovery programs.

Black (cited in Williams, 1985) stated that it takes many years for substance-abusing parents to become healthy role models for their children. Black (cited in Williams, 1985) stated that the process of becoming effective role models could be more timely through the teaching of effective parenting skills.

Rogers (cited in Miller, 1986) noted that 75% of all pediatric cases of Acquired Immune Deficiency Syndrom (AIDS) contracted the syndrome from their mothers and that 61% of those mothers were drug abusers. Another 12% reported being the sexual partners of men who used drugs.

Coats (1986) stated that while there is little data substantiating a relationship between substance abuse and child abuse, a relationship does exist if the records of social workers and court cases are taken into account.

Wapner and Finnegan (cited in Coats, 1986) noted that early signs of pregnancy are sometimes very

similar to substance withdrawal symptoms. When a pregnant woman confuses the signs of her pregnancy as a withdrawal symptom, she most often will seek more substance to ease her withdrawal symptoms.

Finnegan et al. (cited in Coats, 1986) noted that indications of prospective good parents in high-risk addictive mothers can be seen in the interest they show in their babies' welfare before birth. This concern can be measured in numbers of prenatal clinic visits.

Finnegan et al. (cited in Coats, 1986) noted that violence and/or abuse afflicted upon drug-abusing women occurs much more often than the rate found in non-drug-abusing control groups.

Finnegan et al. (cited in Coats, 1986) found that drug-abusing pregnant women often have liver disease which contributes to the malnutrition of the fetus in utero. This problem contributes to other developmental problems the baby is likely to have at birth. When these problems are serious enough, hospitalization is lengthy. This situation contributes to maternal separation and a higher possibility of subsequent maternal detachment.

Finnegan et al. (cited in Coats, 1986) found that drug addiction affects the entire family, not just the

abusing mother. To assist the family in overcoming the problems of addiction of the mother, family therapy should focus on four goals. These goals are developing family resources, improving family and interpersonal relationships, reducing to eliminating socially destructive behavior, and facilitating adjustment to parenthood. To accomplish these goals both prenatal and postpartum mother-infant attachment should be encouraged. A focus on developing parenting skills to fullest should also be encouraged. This process helps to lessen the possibility of child neglect. The process should not be completed until long-term follow-up care is given including observations to assess the family in the home setting.

Chasnoff (1986) noted that cocaine is believed to leave long-term effects on both mother and infant after pregnancy and that the role of the medical community and government should be to treat the issues that contribute to drug abuse. These issues include poverty, malnourishment, ignorance, and immaturity in parents. Chasnoff (1986) further noted that infants born to cocaine-addicted mothers show little or no interaction with or reponse to their mothers. This author believes that the infant's inability to interact with the mother delays or inhibits bonding. Chasnoff

also noted that in the same study, a higher incidence of infant deaths occurred due to sudden infant death syndrome.

Chasnoff (1986) found that by having mothers read to cocaine-affected children, reading and language scores improved. Another simple but important procedure that was encouraged included having mothers make eye contact with children when reading and talking with them. This procedure was found to improve the cocaine-affected child's ability to learn, to verbally communicate and to feel acceptance. Chasnoff concluded that this is a new area of concern and that further research is indicated for a more complete understanding of cocaine-related problems in child development.

Parenting Issues

Williams, Omizo, and Abrams (1984) found that parents of learning-disabled children had positive changes in attitude when participating in parenting education which incorporated the Systematic Training for Effective Parenting program developed by Dinkmeyer and McKay (1989). Williams et al. (1984) also noted that these learning-disabled children showed a shift in focus of control from external to internal.

Jackson and Brown (1986) found that enhancing parenting skills through the implementation of the Systematic Training for Effective Parenting program was positive for both parents and children but was more beneficial to the attitudes of parents about parenting.

Trelease (1989) noted that bonding between parent and child can be reached very effectively by the parent reading one-on-one to the child at least once a week. The optimal benefit shows when it is done once every day.

Kagan (in Trelease, 1989) found that disadvantaged children improve deficient verbal skills dramatically by one-on-one reading by adult to child. The adult then listens attentively to the child's response to the reading.

Trelease (1989) noted that one-on-one reading, adult to child, also enhances the attention span of the child because reading gives the child a concept of a subject. The concept attainment enhances the experience the child has later with the subject.

Honig (1985) wrote the mother-child relationship holds implications for the child's compliance with others. Honig (1985) also wrote that issues of child-rearing style, timing and setting of control

techniques, development of self-control, and problem solving were directly related to this relationship.

Silverman (1986) edited a collection of 22 resource guides on various aspects of child development and parenting. This collection includes information on toddlers, 2 and 4 year olds, the middle years from 6 through 11, adolescents, discussing sex with young children, preparing for kindergarten, communication between parents and teenagers, the play of children, ages and stages of 6 through 8 years, junior high school years, day care, child abuse, parent involvement at school, and planning for temporary child care to enable adults to attend meetings.

Application of New Concepts to Everyday Life

Tyler (1949) wrote that students are more likely to apply learning when they see the similarity between the situations encountered in life and the situations in which the learning took place. Tyler (1949) also wrote that two conditions insured the perception of the similarities between the life situations and the learning situations in the student. Those two conditions are that the life situations and the learning situations are alike in many ways and that the student is given practice in seeking illustrations

in his or her life outside the class for the application of things he learned in class.

Tyler (1949) also wrote that ideas which are consistent with each other, and which are integrated and coherent, reinforce each other. Tyler (1949) noted that ideas which are compartmentalized, or are not consistent with each other, may require more time to learn and may actually interfere with each other in learning. Tyler (1949) suggested that objectives be reviewed to see that they are mutually consistent and allow a strong degree of integration for the highest degree of psychological benefit to the learner.

Tyler (1949) noted that attitudes are strong influences on behavior and that there are four ways to develop attitudes. Those four ways are (a) assimilation from environment, (b) emotional effects of particular kinds of experiences, (c) traumatic experiences, and (d) direct intellectual process. Tyler (1949) wrote that to change an attitude the teacher should (a) promote the desired attitude, (b) give opportunities for experiences which have satisfying emotional elements, (c) provide broad analysis of social situations in order to develop understanding, then attitude, and (d) provide

opportunity for students to review their behavior, to review the goals to which they talked about achieving, and to see how close their behavior is to what they say they believe it should be. Tyler (1949) noted that this type of review helps to influence and develop attitudes. Tyler (1949) also wrote that there is no way in which a student can be forced to change his or her attitude. Tyler (1949) wrote that change in attitude grows out of the student's change in view. This change comes either from new insight or new knowledge about a subject or from satisfacation obtained from certain views previously held or a combination of these things. Tyler (1949) noted that learning experiences should be set up to provide these kinds of opportunities for insight of new knowledge and satisfaction from the experience.

Tyler (1949) wrote that evaluations determine to what extent the educational objective were successful. Tyler (1949) also wrote that evaluations of a personal or social nature could be noted by observation and that interviews were also appropriate.

In conclusion, a review of the relevant literature showed that many factors should be taken into consideration when working with addicted women and

their children. Women are often addicted to more than one drug and usually have dysfunctional families. The drug abuse impairs a woman's ability to be an effective parent, and often impairs children born to these mothers. Because traditional techniques do not work with drug-affected families, this writer had to look to areas closely related to the problem. Relevant information was found in the literature on developmental and learning theories, addiction issues, parenting issues, and ways in which new concepts could be incorporated into everyday life.

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS

Goals and Expectations

Successful nuclear families are important to American society because they form the nurturing structure that children need to thrive. Dysfunctional families, especially those affected by drug abuse, are at risk for compromising that nurturing structure. Children growing up in compromised family situations are at risk of becoming dysfunctional themselves. Because of the cycle that drug and alcohol abuse can produce in generations in a family, the goal of this practicum was to help these dysfunctional families to become healthy, functional families.

To fulfill this goal this practicum had two specific objectives. The first was to give drug-abuse recovering mothers skills in parenting. The second was to give families opportunities for successful family experiences which encouraged bonding between mothers and their children.

Behavioral Expectations

To achieve the two specific objectives of giving parenting skills to drug-abuse recovering mothers and to giving opportunities for successfuly family experiences in order to encourage bonding, the writer chose three specific behavioral objectives for this practicum.

1. Over a period of 8 months, recovering mothers will improve their parenting skills by completing 70% of the assigned activities.

2. Over a period of 8 months, recovering mothers will participate in the number of opportunities for successful family experiences 70% of the time.

3. Over a period of 8 months, the average score on the Walker Problem Identification Checklist will decrease by 20% or more.

Evaluation Instruments

The first objective was measured by whether the mother completed 70% of the course assignments. It was not possible to evaluate completion with elements of class attendance. This was necessary should a mother reach a point in her recovery that she felt

more vunerable to relapse, then she should have made use of the parenting class time to attend an Alcoholics Anonymous, Narcotics Anonymous, or Aftercare meeting. In recognition of this vital necessity, attitudinal changes and the mastery of skills learned in the parenting classes were monitored through journals kept by the mothers, completion of coursework assignments, participation in role-playing activities in class, and observation of daily living by resident managers.

The second objective was measured by the number of opportunities the others utilized for participation by themselves and their children. The objective was considered met if the mothers utilized 70% of the suggested family experiences. Utilized opportunities were recorded in journals.

The third objective was measured using the Walker Problem Identification Checklist (Walker, 1983). Scores were derived by both the mothers and the resident managers. The objective was met if this score was 20% lower than the scores found in Tables 1 and 2. The administrator's manual of the Walker Problem Behavior Identification Checklist (Walker, 1983) noted that 20% is an acceptable number to seek

in improvement of behavior and that the instrument is sensitive to this matter.

Mechanism for Recording Unexpected Events

In working with women recovering from drug abuse, the writer felt that many variables could affect the course of this practicum. The most important task these women had was to maintain their sobriety and to continue their recovery. Drug-abuse recovery is difficult because the women may, at any time, find themselves close to relapse. To know that there would probably be many unexpected events is the reality of working with recovering drug addicts. To monitor these unexpected events, the writer kept a weekly log of these events and the manner in which she dealt with them.

CHAPTER IV

SOLUTION STRATEGY

Discussion and Evaluation of Possible Solutions

Because the area of drug abuse and its effects on the nuclear family were not completely known at this time, there were few solutions being implemented. Parent training was available from the state human services agency, but it was only eight weeks long. The class was not detailed in information about life cycles, discipline methods, or bonding issues. Two of the women in the recovery houses had been through the eight-week course and reported that it did not help them very much with the disciplining of their children. The eight-week course did focus on nutrition, sleep schedules for children, and first aid. This class did not seem to meet the needs of the drug-addicted recovering mother.

There were no materials available that had been designed specifically for the drug addicted recovering mother in the literature. There were no materials for this population found in the trade press. What was

available was the testimony of professionals who had worked in similar situations with this population.

Description and Justification for Solution Selected

Using information gathered from many sources, a solution incorporating issues of parenting, family life, and addiction recovery were implemented. All aspects of the solution were justified by the work of other professionals and by the recommendations of the drug-addiction professionals working directly with these women.

From the work of Householder et al. (1982) the solution incorporated information about children of addicted women. Emphasis was made on the behavior problems, short attention spans, and problems in socialization that children of drug-addicted women could experience.

From the work of Weitzman (1985) the writer strove for the attainment of a positive working relationship with mothers and their children. An effort to give a mother only as much parenting responsibility as she could comfortably accommodate in her recovery was made, as suggested by Weitzman's (1985) finding that families in therapy for drug-related problems tended to be overwhelmed with

aspects related to parenting and family life. At the appropriate time the writer helped the mothers identify the stages of emotional development they were in and the stages their children were in so that, as Weitzman (1985) wrote, these mothers could begin to identify their situations and move toward some positive goals for themselves and their families.

From Erikson's (1950) work in identifying stages of psychosocial development which include the entire life cycle, the writer used these stages to help mothers understand the conflicts facing children as they pass through various stages. The writer also helped to impress upon the mothers the quality that are the results of each stage.

From the work of Piaget (in Skolnick, 1986) the writer familiarized mothers with the development of intelligence in babies so that they could become aware of what is normal for a baby. From Piaget's work it was hoped that mothers would learn to pay close and careful attention to their babies to determine successfully how their children had been affected by drug abuse in utero.

To accomplish the objectives of mothers learning about life cycles (Erikson, 1950) and the development of intelligence in children (Piaget in Skolnick, 1986)

the solution incorporated a series of 22 resource guides (Silverman, 1986) on various aspects of child development and parenting. The writer chose these resource guides because they gave important information in an easy to understand manner. Each guide opened with information about life cycles and/or stages of development of intelligence as it related to the major focus of the guide.

Gibson et al. (1987) found that addicts need approval when in therapy. Approval needs were met through Aftercare meetings. These meetings were part of the recovery process and were held with several mothers in group sessions. Women received sympathy, encouragement, approval and other elements of emotional sustenance during these meetings. The writer attended some of these Aftercare meetings with the mothers at the invitation of the mothers and the addiction professionals working with the mothers. The addiction professionals felt that Aftercare meetings were the most appropriate time for approval needs to be met because the women received approval from the professionals and from other women in the group. The professionals used these kinds of meetings for this purpose in working with other areas of the women's lives.

Because several women in both of the recovery houses had been cited for child abuse and/or child neglect, the writer incorporated an emphasis on child development. This emphasis was incorporated based on the findings of Erickson and Egeland (1987) who found that maltreating mothers did not have a good understanding of basic child development, so that the mothers often abused their children for what they thought were inappropriate behaviors.

From Williams' (1985) work with alcohol-affected families, the solution incorporated elements that she felt were of greatest importance to these families. The solution promoted positive parent-child relationships, used the recovery house situation to demonstrate elements of stable home life, showed mothers how to meet the physical needs of their children, how to reward consistently, and how to use appropriate discipline methods. As Williams (1985) further suggested, family roles, expectations, responsibilities and communication in the healthy family were stressed.

From Black's work (cited in Williams, 1985) the main avenue of reaching the goal of effective parenting in these mothers was through parenting classes. Because Black (cited in Williams, 1985) noted that

extended periods of time are needed to develop parenting skills the classes will occur in an eight month calendar plan.

While Acquired Immune Deficiency Syndrome (AIDS) is not the most pressing problem of these mothers, some have been affected by it. From Rogers' (cited in Miller, 1986) work in noting that 61% of pediatric AIDS cases contracted the disease from drug-abusing mothers, AIDS education was incorporated into the parenting curriculum for these women.

From Coats' (1986) statement that a relationship does exist with drug-abusing mothers and child abuse, a strong emphasis was placed on the difference between acceptable discipline practices and child abuse. From Coats' (1986) statement of desired goals for the drug-abuse recovering family, the author incorporated activities to improve family and interpersonal relationships, reducing socially destructive behavior, and facilitating adjustment to parenthood. Coats (1986) also included a goal of developing family resources. This was also included in the solution, except for financial resource planning. Money issues, budgeting, and employment issues were covered in Aftercare because those issues are important ones for recovering drug addicts.

From Chasnoff's (1986) work several issues were addressed. Bonding, the importance of eye contact, and the cocaine-affected child's possible language and reading deficiencies were treated by having mothers read to their children every night. Suggestions from Kagan (in Trelease 1979) and Trelease (1979) were also incorporated to ensure that the individual reading time would be as meaningful as possible. The author asked the church sponsoring the recovery houses to develop home libraries.

From Williams, Omizo, and Abrams (1984) and Jackson and Brown's (1986) work citing the appropriateness and measured improvement in both parents and learning disabled children, the parenting classes will incorporate Dinkmeyer and McKay's (1989) Systematic Training for Effective Parenting Program. The program, as it is incorporated in this solution, addressed Honig's (1985) statement that control techniques and problem solving are crucial to the parent-child relstionship.

The solution incorporated aspects of Tyler's (1949) work. Tyler's (1949) statement, students are more likely to apply learning when they see the similarity between the situations encountered in life

and the situations in which the learning took place, and that two conditions must be met for the learner in order to ensure the perception of the similarities between the life situation and the learning situation, were addressed. The first condition, that the life situation and the learning situation be alike in many ways, was met in the selection of the materials, the atmosphere in which the class was taught, and the emphasis placed on the mothers assisting and encouraging each other in parenting skills as they did in drug abuse recovery and in the living of their day-to-day lives. The other condition for learning suggested by Tyler (1949) was that the learner was given practice in seeking illustrations in his or her life outside the class for the application of things he or she learned in class. This condition was met by asking the mothers to fulfill special assignments in working with their children and by asking them to share in class problems or concerns that they had in the everyday raising of their children.

The solution was organized incorporating another aspect of Tyler's (1949) work. From Tyler's (1949) work that ideas which are consistent with each other, and which are integrated and coherent reinforce each other, came the organizational philosophy of the

parenting curriculum for these parenting classes. Appropriate discipline for children was one of the major topics of discussion during the implementation period. Tyler's (1949) statements regarding changes in attitude and how those changes occur were also incorporated when appropriate discipline for children was discussed. By promoting the desired attitude, giving opportunities for experiences which had satisfying emotional elements, providing broad analysis of social situations in order to develop understanding and then attitude, and providing for the mothers to have opportunities to review their behaviors and to review the goals they had stated for themselves, they were able to see how close their behavior was to what they believed it should be.

Tyler's (1949) work seems to be the exact philosophy for which the Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989) was written. Because this handbook was divided into nine chapters, the writer used these chapters at the rate of one per month. At the end of each chapter was a self-evaluation sheet, "My Plan for Improving Relationships." The self-evaluation sheet included sections where the student could write his or her specific concerns, usual response to inappropriate

behavior of children, progress noted, a specific thing that was learned, and a goal for new behavior. These self-evaluation sheets were done on a monthly basis.

The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989) also contained a selection of questions to be answered at the end of the chapter. The mothers were asked to answer the questions at the rate of two to three a week and to re-read the month's assigned chapter before the class meeting date. In this manner mothers reviewed the material at least four times.

Each chapter was also followed by a problem situation. Mothers were asked to read the problem situation and respond to it either in groups of two or three in using the technique of role playing. Each chapter was also followed up with an activity for the week. Because only one activity was offered for the week the women were asked to choose another activity in which they can experience understanding the concepts of Erikson (1950) and Piaget.

The solution also incorporated the 22 resource guides (Silverman, 1986) on various aspects of child development and parenting. Because these resource guides contained information on the concepts of Erikson (1950) and Piaget, and because they included

activities which parents may choose to use with their children, the mothers were given sets of this material to use in their own planning and goal setting.

In order to help the women establish healthy routines with their children, three rules were established for everyone living in both houses. From Brazelton's (1989) work, mothers were asked to gather their children around them when they return home from work for the purpose of reuniting the family for the evening in a spirit of nurturing and bonding. Mothers were encouraged to sit and talk to their children for about 20 minutes about the day's events.

From Phillips and Bernstein's (1989) work mothers were encouraged to find four opportunities during the evening in which to praise their children. It was hoped that this practice would raise the self-esteem of the children, and in turn, would raise the self-esteem of mothers.

From Trelease's (1989) work and Chasnoff's (1986) work, mothers were asked to read to their children for at least 15 minutes every evening. It was hoped that this practice improved language skills and bonds between mothers and children.

Report of Action Taken

The writer consulted the directing board and the house managers to determine a weekly meeting time for parenting skills development. Upon their recommendations a time was chosen and length of meeting time was established. The directors also determined that all mothers must participate in the program.

The writer met with each mother individually for about an hour before the beginning of implementation. The mothers discussed their backgrounds, addiction history, and any problems they were having with their children. The writer kept a folder on each mother to record his information.

The writer made arrangements for the women of one house to be transported to the second house. All mothers met in the living room with the writer. Babies and toddlers stayed with mothers during meetings. Older children watched videos or played games in the next room. The telephone was turned off for these meetings and refreshments were made available. Every effort was made to keep the women comfortable and calm. Each mother was given a copy of the Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989) to use and keep.

Each month had a major focus. Each weekly class covered an aspect of that focus. An overall focus on appropriate discipline was made during the entire implementation process with the use of the Systematic Training for Effective Parenting Program (Dinkmeyer & McKay, 1989).

Supplemental readings were required. In order to help the mothers understand the dynamics of reading aloud to children they were asked to read The New Read Aloud Handbook (Trelease, 1989) at the rate of one chapter per month. To learn how to assist their children with school work, mothers were asked to read Making the Grade: A+ Advice for Parents (Black, 1989) at the rate of one chapter a month. To help mothers give their children good self-images, mothers were asked to read How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989) at the rate of one chapter per month. One copy of each of these books was placed in each recovery house for each mother to read at her convenience.

The writer met with the mothers for a total of 36 sessions. A complete calendar of topics and materials is included in the appendix of this report (See Appendix A). The proposal for this practicum included topics and materials for 32 sessions. As the

implementation of this practicum progressed, other topics were included at the request of the mothers or the addiction professionals working with the mothers.

The focus for Month 1 was "The Toddler and the Preschooler." Discussion topics included child development and life cycles according to Erikson and Piaget, children's behavior and misbehaviors, meeting the needs of the toddler and preschooler, and finding good day care. Other related topics discussed were the use of praise with children, reading to children, and goals for parents. The Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989), Chapter I was discussed in all four sessions during the month.

The focus for Month 2 was "The Early School Years." Discussion topics included child development and the life cycles according to Piaget and Erikson during the years 5 to 10, how emotions, lifestyles, and birth order relate to the disciplining of children, meeting the needs of the school aged child, appropriate play activities, how children learn, and understanding the public school system. Chapter 2 of the Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989) was discussed at all four sessions during this month.

The focus for Month 3 was "Dealing with Discipline." Discussion topics included effective discipline ideals, principles of democratic discipline, issues of child abuse, and issues of spouse abuse. The month concluded with mothers setting goals for their children, attempting to focus on their children's assets and strengths, identifying unreasonably high expectations, double standards, and overambition. Chapter 3 of the Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989) was discussed at all four sessions.

The focus for Month 4 was "Values Clarification." Discussion topics included the origins of morals and values, cultural differences, roles parents play when children express feelings, bonding and its effect on the values emphasized to children, the importance of mutual respect, and the parent as an effective listener. Other topics discussed were ideas on how to foster acceptable morals and values in children and how to be a reflective listener to children. Television and its effect on family members' morals and values was also discussed. Chapter 4 of the Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989) was discussed at all four sessions.

The focus for Month 5 was "Solving Conflict." Topics discussed were how to approach confrontation with sensitivity, communication in building trust, children's friendships, and the application of this material to adult relationships. Chapter 5 of the Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989) was used.

The focus for Month 6 was "The Adolescent." Topics discussed were child development and life cycles for ages 12 to 14, the basic principles of natural and logical consequences in discipline, the physical, mental, and social changes in adolescents, and meeting the needs of the adolescents. Other topics included the social issues of the adolescents including dating, sex, and drug use. Discussed at all four sessions of this month were the major differences between punishment and logical consequences in disciplining children and Chapter 6 of the Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1989).

The focus for Month 7 was "The Teenager." Topics discussed were child development and life cycles for ages 14 to 18, applying natural and logical consequences to the concerns of teenagers such as clothing, hairstyles and chores, meeting the needs of

the teenager, and the social issues concerning teenagers such as sex, drugs, and AIDS. Other topics discussed were getting a high school diploma, college entrance, and technical training for teenagers. Chapter 7 of the Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989) was discussed at all four sessions.

The focus for Month 8 was "Adult Children of Addicted Parents." Topics discussed were the predisposition of children to addictive disease, prevention, and how to get help. Other topics discussed were how to conduct a family meeting, developing confidence as a parent, and setting goals as a family. Chapters 8 and 9 of the Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989) were used at all four sessions.

Four extra sessions were held at the request of the mothers. The focus of two sessions was how to care for the cocaine-affected baby. For these two sessions a medically-licensed foster mother who cares for "cocaine babies" was a guest speaker. She taught the women simple calming exercises to do with cocaine babies. She also gave tips on how to deal with the digestive and respiratory problems that many cocaine-affected babies have.

Another session's focus was a study conducted by the local public school system on cocaine-affected babies in the kindergarten classroom. Several newspaper and television news stories were generated about this study and the mothers had many questions about it. The psychologist supervising the study was a guest speaker for this session.

Another session was held to educate the mothers to the Acquired Immune Deficiency Syndrome (AIDS). A guest speaker from a local AIDS assistance organization taught the mothers how the disease is transmitted, how to get medical testing and other assistance, and prevention techniques. This was one of the most popular sessions as the mothers felt comfortable in asking questions in this small group setting.

One last session was held for the purpose of evaluating the practicum. Mothers who were present at the beginning of the implementation period were asked to again complete a copy of the Walker Problem Behavior Identification Checklist (1983). All mothers were asked to complete the Written Evaluation Instrument. The writer also interviewed directors of both recovery houses, the house mothers, and each resident.

CHAPTER V

RESULTS, UNEXPECTED EVENTS, CONCLUSIONS, AND RECOMMENDATIONS

Dysfunctional families affected by drug abuse suffer from many problems. Children growing up in these families often perpetuate the drug-addiction cycle. Mothers recoverng from addiction usually do not have knowledge of basic child development or parenting skills. As a result of evidence collected about these families and an examination of related literature, the goal of this practicum was to help those dysfunctional families to become healthy, functional families.

To fulfill this major goal two specific objectives were developed. The first objective was to give drug-abuse recovering mothers skills in parenting. The second objective was to give families opportunities for successful family experiences to encourage bonding between mothers and their children.

Results

Each week mothers were given instruction in an aspect of parenting and/or healthy family life. Along with instruction mothers were encouraged to participate in different kinds of opportunities for successful family experiences. Before the implementation process mothers were asked to evaluate the behaviors of their children on the Walker Problem Behavior Identification Checklist (1983). House managers were asked to evaluate each child in the house to provide a possibly more realistic view of the child's behavior.

The first objected was measured by the amount of coursework completed by the mothers. At the beginning of the implementation period 8 mothers were living in the two recovery houses. Of those 8 mothers, 3 mothers remained in the recovery houses during the entire implementation period. Two of these three mothers completed 100% of the assignments. One mother completed 60% of the assignments.

For those mothers who were residents of the recovery houses for the entire implementation period, the results for the first behavioral objective, over a period of 8 months recovering mothers will improve their parenting skills by completing 70% of assigned

activities, were positive. The three mothers in residence for the entire implementation period completed 86% of the coursework (see Table 3). The writer felt that the results were positively affected by the position taken by the board of directors overseeing the recovery houses in requiring residents to be active in the program.

Table 3. Percentage of Assignments Completed of Mothers in Program for 8 Months

Mother	# of Months In Program	% of Assignments Completed	*Indicates Goal Reached
A	8	100	*
B	8	100	*
C	8	60	

Total average of assignments completed for mothers in program 8 months 86%.

For those mothers who were residents of the recovery houses for less than the 8 month implementation period the results were also positive. The 6 months had been residence varying amounts of time and had completed 78% of the coursework present to them in relation to the time they had in residence at the recovery houses (see Table 4).

Table 4. Percentage of Assignments Completed by Mothers in the Program for Less Than 8 Months

Mother	# of Months In Program	% of Acceptable Completed	* Indicates Acceptable Progress Toward Goal
D	6	50	
E	5	100	*
F	3	100	*
G	3	20	
H	2	100	*
I	1	100	*

Total average of assignments completed for mothers in program less than 8 months 78%.

One mother who exited the recovery house after 4 months of residency and abandoned her recovery program completed 70% the assignments while a resident the first time. This mother re-entered the recovery house 4 months later and then completed 100% of the coursework assignments in the last 2 months of the implementation period. This mother's progress was not included in the above tables, but is included in this report because this mother felt that her improved personal recovery program during

her second residency influenced her improved performance in completing parenting coursework as well.

The second objective, recovering mothers will participate in the number of opportunities for successful family experiences 70% of the time, was met with positive results. The implementation period was 32 weeks. The mothers listed (see Table 5) were the mothers who had children living with them at the recovery houses. These mothers were very successful in taking advantage of opportunities offered to them and in developing wholesome activities of their own.

Table 5. Percentage of Successful Family Experiences

Mothers who Had Children Living with Them	# of Weeks In Parenting Program	# of Planned Successful Family Experiences	% of Successful Family Experiences
A	32	32	100%
B	32	32	100
C	32	41	128
E	20	20	100
G	12	4	33
I	4	3	75

Percentage of successful family experiences 89%.

The sponsoring church bought art supplies, seasonal passes to the city zoo, and organized holiday activities at the church. The mothers utilized some donated bar-b-que cooking equipment for cookouts. Some of the mothers took advantage of family-oriented activities sponsored by the various Alcholics Anonymous or Narcotics Anonymous groups. One mother's relative was the pastor of a large church in a nearby community. He and his congregation often invited the mothers and their children to special family-oriented events.

Before the mothers were allowed to record the event it had to meet certain criteria. The event had to be an hour or more duration and had to include active participation of the mother and her children. Mothers were encouraged to plan for one activity per week.

It should be noted that in many cases mothers living in the recovery houses who did not have custody of their children often participated in these events, as they were encouraged to do. These mothers sometimes reported that these family-oriented events made them miss their own children more and sometimes reported that these events actually eased the longing to be with their children.

The third behavioral objective was the average score on the Walker Problem Behavior Identification Checklist would decrease by 20% or more. Evaluations of their children completed by the mothers who were in residence during the entire 8 month implementation period revealed change. The average score was 67 in the beginning of the implementation period. At the end of the implementation period, the average score was 62, which represents a change of 5% lower than the beginning of the period (see Table 6).

Table 6. Scores from the Walker Problem Behavior Identification Checklist as Administered by Mothers for Children

Child	In the Program for Raw Score	Entire Implementation Period Converted Scores	* Children Needing Intervention Therapy
A	See note		
B	22	70	*
C	See note		
D	See note		
E	7	54	
	Average	62	

Note: The mother of these three children stayed in the recovery house and in the parenting program for about

six weeks into the implementation period. At that time she left the program.

Evaluations completed by the resident managers using the Walker Problem Identification Checklist (1983) of the two children remaining in the recovery houses during the entire implementation period were 12% lower (see Table 7). The average score was 64 at the beginning of the implementation period and 52 at the end of the implementation period.

Table 7. Scores from the Walker Problem Behavior Identification Checklist as Administered by Resident Managers for Children in Program for Entire Implementation Period

Child	Raw Score	Converted Scores	Children Needing * Intervention Therapy
A	See note Above		
B	14	16	*
C	See note above		
D	See note above		
E	4	49	
	Average	52	

Two children joined their mothers at the recovery house six weeks after the implementation period began. When the mother evaluated the children with the Walker Problem Behavior Identification Checklist (1983) the average scores were 63 in the beginning of their residency (see Table 8).

Table 8. Scores from the Walker Problem Behavior Identification Checklist as Administered by Mothers for Children in Programs for Less Than Entire Implementation Period

Child	Raw Score	Converted Score	Months in Program	* Needing Therapy
F	10	49	7	
G	21	73	6	*
		Average 63		

The scores of the Walker Problem Behavior Identification Checklist (1983) of the two children entering the program at the end of month 1 and month 2, respectively, as evaluated by the resident managers showed both children in need of intervention therapy (see Table 9).

Table 9. Scores from the Walker Behavior Identification Checklist as Administered by the Resident Managers for Children in Program for Less than 8 Months at Entry of of Program

Child	Raw Score	Converted Score	Months in Program	Needing Therapy
F	18	59	7	*
G	29	83	6	*
	Average	71		

It is noted that the addiction professionals working with the mother of these two children believe that she was so guilt-ridden over her addiction history, that she was unable to recognize problem behavior in her children. This observation could explain why the scores as they were derived from the resident manager's evaluations were higher for both children (see Table 9).

As part of the evaluative process of this program, recovering mothers were asked to complete a written evaluation instrument (see Appendix B). Eleven statements were presented. The mothers were asked to rate the statements with possible values of "5-Excellent,

4-Very Good, 3-Fair, 2-Poor, 1-Unacceptable." Three essay questions asked mothers for opinions or suggestions for improving the course. Five mothers completed the evaluation. Of these mothers, 2 had been residents of the recovery houses for the full implementation period. The other two mothers had been in residence for 6 months or longer.

Questions 1, 2, 3, 5, 6, and 7 dealt with the course discussion, materials, activities, group leader, opportunities for contributions by mothers, and the incorporation of suggestions. These questions received high ratings of 5-Excellent and 4-Very Good from all five mothers. Questions 3 which dealt with the appropriateness of guest speakers received ratings of 4-Very Good and 3-Fair.

Questions 8 and 9 asked mothers to rate themselves as parents before the implementation of this parenting program and after. Three mothers gave themselves values of 2-Poor as parents before implementation. Two mothers gave themselves values as 3-Fair. All three mothers who evaluated themselves as 2-Poor at pre-implementation, gave themselves 4-Very Good at post-implementation. The two mothers who gave themselves 3-Fair at pre-implementation gave themselves 4-Very Good at post-Implementation.

For Questions 13 and 14, mothers were asked if they would recommend this course to other mothers and if the course should be required for other recovering parents. Five of the five mothers rated these questions 5-Excellent.

Question 10 asked mothers to comment on what would make this class more meaningful. Mothers suggested including fathers or boyfriends, adding more information on the developmental problems of addiction-affected babies, including information about babies addicted to substances other than cocaine and/or alcohol, and making mothers become more active in addiction issues involving children.

Question 11 asked women to evaluate the group meeting time, length of meeting, and place. Three mothers responded that the meeting time was appropriate. One mother responded that it was too long and another responded that it was too short. All five responded that the place of the meetings was safe and comfortable. One mother responded that she felt comfortable in discussing her problems in the recovery house.

Only one mother responded to Question 12 which asked women to list any aspect of the parenting course

which was not included on the evaluation. The mother wrote "the availability of resources to help addicted mothers and children excellent."

To complete the evaluative process the writer interviewed two members of the board of directors of the recovery houses. Board members were asked to comment on what they felt were the strengths and weaknesses of the program. It was concluded that this type of course made mothers become accountable for being at a set place and time each week, which in turn helped to reinforce healthy habits encouraged in recovery treatment. It was also concluded that this course gave women valuable information, most of which they had never heard before. Another strength mentioned was the many different perspectives of parenting this course presented to the women. The one weakness discussed was the program was too technical at the beginning. It was noted that the writer soon realized this herself and lowered her level of teaching and vocabulary. One board member responded that she felt the program and the writer had become part of the "intervention team" working with these women.

Unexpected Occurrences

Because of the nature of drug addiction, the writer expected that there would be some unusual occurrences during this implementation period. While the goals and behavioral objectives were positive experiences for the recovering mothers and the writer, it was the unexpected occurrences which gave the writer the most insight and, ultimately, educational experiences with this population.

The first two parenting meetings were successful in execution, but emotionally strained for the mothers. At the third meeting the writer decided that sharing some of her more personal background, including the story of the addicted person in her life, might alleviate some of the tension the mothers were feeling. As the writer was telling her story of dealing with an alcoholic loved one, the mothers began to relax, smile, and after the meeting approached the writer to express gratitude for sharing the story. From that meeting forward, a bond began to form between the writer and these mothers.

In the second month the writer was contacted by the state welfare system as an inquiry into the performance in class and the writer's professional

opinion of one mother's parenting skills. The welfare worker requested a written statement of this mother's parenting ability. The writer was contacted 14 times in the 8 month implementation period regarding similar queries about 8 of the recovering mothers. From these contacts, the writer began to notice that even when these mothers successfully completed "performance contracts" with the welfare system, the mothers still had very difficult negotiations with the system in regaining custody of their children and, in some cases, obtaining simple two-hour supervised visits with their children.

One problem noted with the welfare system was the high turnover of case workers. Everytime a mother received a new caseworker, her effort to gain custody of her children had to start all over again. In many instances paperwork was lost or misplaced for weeks. In some cases mothers would go for weeks without a caseworker returning her phone call. The writer tried to assist these women as best she could, but felt ineffective in what she could accomplish.

In desperation over the plight of these addicted women who had made outstanding progress in their recoveries, the writer contacted a local law firm that had a community affairs department which handled

mainly pro bono cases for the poor and public interest issues on behalf of the community. The department chairman agreed to interview two of the recovering mothers and review their cases. He immediately assigned attorneys to handle the cases of any needy mother residing at the recovery houses. The lead attorney explained to one of the addiction professionals and the writer that he felt there could have been enough evidence to file a class-action law suit against the state welfare system for practicing descrimination against recovering mothers. At the time of this writing, attorneys had successfully gained custody of three children for one mother, and were gathering evidence to file suit. The writer was asked to appear in court five times on behalf of these recovering mothers.

Another unexpected occurrence was referrals to the parenting program from outside agencies. About ten minutes after the meeting began one night a young woman appeared at the front door and asked if that was the place for the parenting meeting. She reported to the group that she was a recovering alcoholic and that she was being required by court order to attend parenting class as part of her "performance agreement" with the state welfare agency. She had heard about the writer's practicum at an Alcoholics Anonymous

meeting. This woman did not even know the address of the house where the parenting meetings were held. She did know the name of the street and simply began knocking on doors until she found the recovery house. She reported to the group that she felt that a parenting meeting with other recovering addicts was the only place she felt "safe." During the implementation period two other women joined the group from outside referrals. These women stressed how important it was to them to be at a parenting meeting where they could freely discuss their addiction and how it impacted their relationships with their children. This unexpected occurrence demonstrated to the writer that recovering women had few resources to assist them with parenting problems.

Another unexpected occurrence was the incidence of homosexuality among residents. The writer learned in the fifth month that one young woman had decided that she was a homosexual and that she wanted her four-year-old daughter to know of her mother's sexual orientation. The writer was prepared to deal with issues concerning sex, but this particular issue was perplexing. After consultation with the addiction professionals and with a local psychiatrist, the writer encouraged the mother to not go into great

detail about her own sexuality and to simply introduce her lover to her daughter as "Mommy's friend." During the implementation period two other women approached the writer with questions concerning their homosexuality and their children.

While the writer did expect that there would be some mothers with low academic skills, she was somewhat surprised at the wide ability ranges that women brought to the group. One thing that became apparent immediately was the fact that even the mothers who had some college backgrounds were not reading the two supplemental books included in the coursework. In discussing this problem with the addiction professionals the writer learned that this unwillingness to read even a chapter a month per book probably stemmed from the mothers' low attention spans. The writer then recorded the books on cassette tapes. Only one mother reported listening to the tapes. The writer simply took the salient points from these two books and incorporated them into discussions.

At the fifth meeting, the writer shared a newspaper article with the mothers. The article outlined some recent research done in the area of cocaine babies. The next week the writer shared

another newspaper article on the same subject. The mothers seemed to enjoy both articles and the following discussions.

At the following meeting the writer did not bring a newspaper article to share and simply began the meeting with the Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989). One mother interrupted immediately, "Hey, where's our article?" The writer explained that she had not brought one to this particular meeting. To that another mother replied, "But we liked those articles. You read the paper all the time. Can't you bring us some more articles?" Other mothers responded in like manner. From that meeting on the writer looked for articles on issues in addiction, pregnancy, childrearing practices, addicted children, early and middle childhood education and Acquired Immune Deficiency Syndrome (AIDS).

From the weekly presentation of the articles, a "lesson plan" evolved. Mothers sat in a circle. The writer asked each how she was doing and if she had any major problems with her children that week, presented the newspaper article, and then the focus material. The writer stayed about 20 minutes after each meeting to speak to mothers individually if they so desired.

At one parenting meeting, the writer presented a chart showing five major developmental theories with the stages depicted according to age group. The writer then presented another chart which showed Erikson's (1950) stages of psycho-social development. A poignant observation was made by one young mother who had been in addiction treatment seven times. She looked at the chart and said, "I'm still at 'industry versus inferiority.' That's where I was when I smoked pot for the first time, and I'm still there. I don't think I can get better until I move out of that stage." Another mother in the group replied, "You won't move out of that stage until you make a commitment to your (AA) program." The young mother started to cry. This incident was reported to the addiction professionals who concluded that teaching recovering mothers about their own development has a far-reaching affect on how they parent and that ultimately could affect how they recover. The writer was reminded of Weitzman's (1985) conclusion that parents abusing drugs were often stagnating in earlier stages of emotional development with no realistic hope for caring for their own families effectively. It should be noted that this mother left the recovery house after four months. Within three months she was using drugs again.

One mother came to the recovery house approximately two months before the birth of her child with an addiction history which included the drinking of approximately a quart of rum a day for five years. This mother's drinking continued until the seventh month of her pregnancy when she went into treatment. At the recovery house the other residents noticed that this mother often went for days without bathing. She was counselled by the resident manger and the house director. These counselling sessions helped but only in small degree. After the birth of her daughter this young mother again refused to bathe herself or her baby. At this point the writer was called in for intervention.

To assist this mother, the writer asked the mother to give the baby a bath assisted by the writer. The mother appeared to be quite competent in the giving of the bath. The writer questioned her about her feelings as she bathed the baby. The mother said that baths were "dangerous," and that she did not want to make her baby sick. The writer explained about bacteria and how the uncontrolled growth of bacteria can make a baby very sick. The writer explained that bacteria can be found in unclean baby items such as sleepers and blankets. A checklist was

developed for this mother which included a daily "things to do" list. The list was countersigned daily by the resident manager. After the initial two-month monitoring period the mother continued with baths for herself and her child. At the time of this writing, the mother was waiting to receive psychiatric treatment. This case was the most critical in terms of basic child care that the writer had to deal with.

The events recorded here give the education professional some idea of the nature and scope of the many problems which occur in the fragile months after treatment in recovering mothers and their children. It is important to recognize that no curriculum can meet all the needs of the recovering mother. The education professional can recognize that understanding, compassion, and common sense are sometimes more important and more helpful than theory.

Conclusions

The goal of this practicum was to help dysfunctional, drug-addicted recovering families to become healthy, functional families. As means to this goal, the writer developed two specific objectives. The first was to give drug-abuse recovering mothers skills in parenting. The second was to give families

opportunities for successful family experiences which encourage bonding between mothers and children.

To achieve the two specific objectives the writer identified three specific behavioral objectives. The first, over a period of 8 months recovering mothers will complete 70% of the assigned activities was met with positive results. The recovering mothers were encouraged to view completion of activities and the parenting class as part of their extended recovery program and were monitored by the addiction professionals and resident managers in their participation in the program. The average number of assignments completed was 86% for mothers in the program for the entire implementation period. The average number of assignments completed for mothers in the program less than the 8 month implementation program was 78%. Both of these groups of mothers completed enough assignments to exceed the objective of 70%.

The writer believed that the commitment given to this practicum by the recovery houses' board of directors was the most important ingredient in mothers reaching this objective. Directors and resident managers made participation in the program a compulsory part of living in the houses. Directors,

resident managers, and addiction professionals offered assistance whenever possible thus ensuring the positive results of this specific behavioral objective.

The second specific behavioral objective, over a period of 8 months recovering mothers will participate in the number of opportunities for successful family experiences 70% of the time, had positive results. Mothers participated in successful family experiences 89% of the time. These results are positive because of the care of family members residing outside the recovery houses and by the church members. These two groups provided many wholesome activities for the families to join. They also provided equipment and funds for activities the mothers carried out on their own.

The third behavioral objective, over a period of 8 months the average score on the Walker Problem Behavior Identification Checklist (1983) will decrease by 20% or more, was not met. The biggest decrease recorded was 12%. This result does show some change. Two citations in the literature could explain the results. Black (cited in Williams, 1985) found that it takes many years for sustance-abusing parents to become healthy role models. Jackson and Brown (1986) found that enhancing parenting skills

through the implementation of the Systematic Training for Effective Parenting program (Dinkmeyer & McKay, 1989) was positive for both parents and children, but was more beneficial to the attitudes of parents about parenting.

The result of the written evaluation of the women in giving themselves higher values as parents after the implementation period is also interesting when considering Jackson and Brown's (1986) finding. Three mothers reported an increased value of two steps from 2-Poor to 4-Very Good. Two mothers reported an increase in value of one step from 3-Fair to 4-Very Good. All of the women who completed an evaluation reported feelings of higher value as a parent, demonstrating that this program was beneficial to the attitudes of parents about parenting.

The overall results of this practicum were positive. The writer felt that the home-like atmosphere of the recovery house was a valuable ingredient in the success of the program. As Tyler (1949) wrote, students are more likely to apply learning when they see the similarity between the situations encountered in life and the situations in which the learning took place. With the parenting program in place at the recovery hourse, Tyler's (1949) conclusion was seen.

Other observations recalling Tyler's (1949) conclusions could also be seen in this program. New attitudes were developed very much in accordance with Tyler's (1949) protocol. Assimilation from the environment, emotional effects of particular kinds of experiences, the result of traumatic experiences, and the direct intellectual process all occurred within this practicum. Also noted by Tyler (1949) was the observation that change in attitude grows out of the student's change in view. This change comes from either new insight or new knowledge, or from satisfaction obtained from experiences or a combination of these things. This parenting program did all of these things.

Some conclusions drawn about the parenting but not measured had to do with three house rules designed by the writer on the basis of the literature and enforced by the resident managers. From Brazelton's (1989) work, the rule that mothers should spend 20 minutes with children in uninterrupted bonding time at the end of the work/school day received the most informal positive comments. One mother reported that ". . .it turned around our entire evening. Dinner is easier and the kids go to bed easier."

As Gibson et al. (1987) suggested, the problem of approval needs was observed by the writer and a vehicle for change was incorporated into the practicum proposal. From Phillips and Bernstein's (1989) work mothers were asked to find four opportunities during the day or evening in which to praise their children. It was hoped that this practice would raise the self-esteem of the children, and in turn, raise the self-esteem of the mothers. What the writer did not come to understand about the mothers until mid-point in the implementation period, was the very low degree of understanding in what genuine, specific praise is. Many discussions in group meetings and on an individual basis dealt with the difference in specific praise and simple common courtesy. Some women thought that saying "thank you" was praise. The writer felt that these women were confused because they had never been praised much themselves as children or as adults. The writer also felt that mothers who had the shortest sobriety time were less able to give praise, probably because they were were in emotional crisis themselves thus having little to offer.

From the works of Chasnoff (1986) and Trelease (1989), the rule requiring mothers to read to their children for 20 minutes every evening was

successfully met by most women. They particularly appreciated learning about the importance of making eye-contact with their children while reading and learning that they should allow the children to choose the books or stories. Mothers of cocaine-affected children seemed to be grateful to know that there was something they could do to rectify the damage done to their children by drug abuse during pregnancy. To ensure that every mother learned the read-aloud skills as suggested by Trelease (1989), mothers without custody of children were encouraged to "borrow" a housemate's child for some reading experiences.

As a result of this practicum the writer noted a personal change in her attitude toward addiction. In applying the work of Krathwohl, Bloom, and Masia (1964), more commonly known as Bloom's Taxonomy in the Affective Domain, the writer felt that she was probably at "1.2 Willingness to Receive" in understanding addiction, the process of recovery, and the 12-Step program. By the end of the implementation period the writer felt that she moved to "4.0 Organization." It was, at that point, when the writer had begun to connect the 12-Step program values into the parenting program. The writer began to stress to the recovering women that they could assess their

progress as parents in their own personal "moral inventory" or the Fourth Step of the 12-Step program. From her own internalization of the 12-Step program the writer came to believe that the 12-Step program was crucial to the goal of healthy parenting in addicted families.

The attitude of other education professionals toward addicted families is critical as well. The writer recalled that during the implementation of this practicum she had the opportunity to meet with a well-known education professional who had designed a program for cocaine babies. The writer asked this educator where she received her training in addiction. The education professional's reply was, "Oh, I don't know anything about addiction. But, I do know education."

Anonymous (1988), an educator and the son of an alcoholic, wrote that educators working with the addicted should be aware of three conclusions that he has drawn from his personal background and professional experience. His first conclusion was that addiction is a family disease and that this implies problems in just about all other relationships. These problems could include having difficulty trusting, experiencing poor quality relationships, and rescuing others from the consequences of their own behavior.

The second conclusion was that often the addicted person and family members are in a state of denial about the disease. The third conclusion was that recovery from addiction requires help, and that this help most often comes in the form of a 12-Step program such as Alcoholics Anonymous or Alanon. This journal author wrote that educators should learn about addiction as a disease including the concept that addiction is a family disease, the characteristics of adult children of alcoholics, and how educators become "enablers" or those who make it possible for the addict to escape the consequences of his actions.

This practicum writer concluded that as long as addiction is a major problem for this country, educators should become familiar with the disease. The school is usually the most important organization outside the family. The education professionals of this country should move to a higher level of Bloom's (1964) Taxonomy of Educational Objectives in the Affective Domain. Perhaps every educator should set a personal goal of "3.1 Acceptance of a Value" in that addiction is a serious family disease.

One final conclusion that the writer drew was that she desired more training in the developmental problems of drug-affected babies. On the basis of

her work with this practicum she applied for and was accepted in the Interdisciplinary Training for Professionals Serving Chemically Dependent Families at the University of California at Los Angeles College of Medicine.

Recommendations

1. The group leader may want to keep a folder of information on each recovering mother. This information, possibly including a sign-in sheet for attendance, might be helpful if this mother is involved in litigation converning her children.

2. Stay away from lofty theory. Offer salient points in a clear, "down-to-earth" manner, remembering the wide ranges of abilities these mothers have.

3. Be sensitive to the needs of those in the group. If one mother has a problem with her child and she wants to discuss this with the group, then let her do so even if the problem is not on the topic planned for that meeting. Other mothers may have the same problem and could benefit greatly from the discussion or might have insight in how to best handle the problem.

4. Become acquainted with the addiction professionals working with the mothers.

They may offer some valuable insight into a particular problem a mother is having.

5. Remember that a mother's sobriety is her first priority. Parenting and family issues come second.

6. Offer praise when a mother handles a situation in a positive manner. Addicts have approval needs especially where family issues are concerned.

7. Ask the recovering mothers enter a partnership with the group leader, particulary if the group leader has little knowledge of addiction. The group leader teaches the mothers about parenting; the recovering mothers teach the group leader about addiction.

Dissemination

The results of this practicum were shared with the recovery house mission group, the county school system, the city's Junior League, and other independent agencies working in the area of addicted women. The Junior League has expressed an interest in this program as a possible future project for their group. The recovery house mission asked that the program be continued. A grant proposal was planned to support the program.

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APPENDICES

APPENDIX A

CALENDAR PLAN

Month 1: The Toddler and the Preschooler

Week 1

Topics discussed:

1. Child development and life cycles according to Erikson and Piaget, years birth to five

2. Children's behavior and misbehavior

Materials used:

1. Chart, "Erikson's Eight Stages" (Skolnick, 1986)

2. Chart, "Stages of Development According to Four Theorists" (Skolnick, 1986)

3. Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 1, pages 5-13, "Questions 1-6," "Activity for the Week" to be completed for the next session

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989), "The Introduction," and Chapter 1, "Why Read Aloud?," pages xi to 18

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), "The Preface," "How to Use This Book," and Chapter 1, "A Strong Foundation," pages 3-28

3. Making the Grade (Black, 1989), Chapter 1, "Making the Grade: An Overview of Successful Learning," pages 17-21

Week 2

Topics discussed:

1. Meeting the needs of the toddler

2. Children's behavior and misbehavior

Materials used:

1. Pamphlet, "Terrific and Terrible Two Year Olds" (Birchmayer, 1989)

2. Pamphlet, "Toddler Topics, 12-24 Months" (Birchmayer, 1989)

3. Chart, "Behavior Illustrations for Ratings of the Various Temperamental Attributes at Various Ages" (Skolnick, 1986)

4. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 1, page 13, "Questions 7, 8, and 9," "Problem Situations 1 and 2," "Activity for the Week"

Week 3

Topics discussed:

1. Meeting the needs of the pre-schooler

2. Children's behavior and misbehavior

3. Why praise is important

4. Reading to children

5. Behavior of Children

6. Goals for Parents

Materials used:

1. Pamphlet, "3 and 4 Year Olds" (McCord, 1988)

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 1, page 13, "Problem Situations 3 and 4," "Activity for the Week," "Understanding Behavior," page 17, "My Plan for Improving Relationships," page 19

3. Understanding Children Through Play Resource Guides (Cooperative Extention Services of the Northeast States)

Week 4

Topics discussed:

1. Finding good day care

Materials used:

1. Pamphlet, "What to Look for in a Day Care Center" (Spedding, 1988)
2. Pamphlet, "What to Look for in a Family Day Care" Home" (Pine, 1988)
3. Booklet, "A Day in Day Care - A Program for Two-Year-Olds" (Birchmayer, 1981)
4. Pamphlet, "Choosing Child Care for Infants and Toddlers" (Spedding, 1984)
5. Pamphlet, "Let's Talk About Child Care" (Spedding, 1988)
6. Pamphlet, "Flexible Work Arrangements" (Dean, 1987)
7. Pamphlet, "Employers and Child Care" (Spedding, 1989)

Month 2: The Early School Years

Week 1

Topics discussed:

1. Child development and life cycles according to Piaget and Erikson, years 5 to 10
2. Emotions, lifestyles, birth order as they relate to disciplining of children

Materials used:

1. Pamphlet, "The World of the Five-Year-Old" (Fender-Robinson, 1988)
2. Pamphlet, "The Middle Years: Six-Eleven" (Mazur & Pine, 1989)

3. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 2, "Understanding More About Your Child and About Yourself as a Parent," page 21-26, "Questions 1-5," "Problem Situation" and "Activity for the Week 1," page 26, "Differences Between 'Good' Parent and the Responsible Parent," page 27

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989) Chapter 2, "When to Begin Read Aloud," pages 19-40

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 2, "The Power of Positive Reinforcement," pages 29-44

3. Making the Grade (Black, 1989), Chapter 2, "Warning Signs of the Unsuccessful Child," pages 23-44

Week 2

Topics discussed:

1. Meeting the needs of the school aged child

2. Appropriate activities

Materials used:

1. Pamphlet, "Ages and Stages of the Middle Years Child, Part I: Six-to-Eight-Year-Olds" (Cherry, 1988)

2. Pamphlet, "Ages and Stages of the Middle Years Child, Part II: Nine-to-Eleven-Year-Olds" (Cherry, 1988)

3. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 2, "Understanding More About your Child and About Yourself as a Parent," pages 21-26, "Questions 6, 7, and 8," pages 26, "Activity for the Week 2," page 26.

Week 3

Topics discussed:

1. How children learn

Materials used:

1. Booklet, "Creating a Learning Climate for the Early Childhood Years" (Hillman, 1989)
2. Booklet, "Early Childhood Education: Foundations for Lifelong Learning" (Cryan & Surbeck, 1979)
3. Booklet, "Early Childhood Education: What Research Tells Us" (Katz, 1988)
4. Booklet, "A Primer on Piaget" (Penrose, 1979)
5. Paper, "How Children Learn" (Wilson, 1987)

Week 4

Topics discussed:

1. Understanding the public school system

Materials used:

1. Pamphlet, "Getting to Know Your Child's School" (Dean, 1988)
2. Pamphlet, "Becoming Part of Your Child's School" (Dean, 1988)
3. Booklet, "How Parent-Teacher Conferences Build Partnerships" (Canady & Seyfarth, 1979)

Month 3: Dealing With Discipline

Week 1

Topics discussed:

1. Effective discipline ideas
2. Seven principles of discipline

Materials used:

1. Booklet, "Discipline is not a Dirty Word" (Birchmayer, 1987)

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 3, "Encouragement: Building Your Child's Confidence and Feelings of Worth," pages 33-41, "Questions 1-4," "Exercise 1-2," "Problem Situation 1-2," and "Activity for the Week," page 41

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989), Chapter 3, "The Stages of Read-Aloud," pages 41-78

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 3, "Tell Me Something You Like About Yourself," pages 45-78

3. Making the Grade (Black, 1989), Chapter 3, "Understanding the Child's World," pages 45-66

Week 2

Topic discussed:

1. Issues of child abuse

Materials used:

* A guest speaker from the local child abuse council discussed issues of child abuse as they relate to the recovering family.

Week 3

Topic discussed:

1. Issues of spouse abuse

Materials used:

1. Pamphlet, "Protecting Children" (Cotter, 1983)

* A guest speaker from a resource center for abused women and children discussed issues of spouse abuse as it relates to the recovering family.

Week 4

Topics discussed:

1. Setting goals for children
2. Focusing on children's assets and strengths
3. Negative expectations and unreasonably high expectations
4. Double standards and overambition

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 3, "Encouragement: Building Your Child's Confidence and Feelings of Worth," pages 33-41, "Questions 6-13," "Exercises 3, 4, and 5," more responses to the "Activity for the Week," page 41

Month 4: Values Clarification

Week 1

Topics discussed:

1. The origin of morals and values
2. Cultural differences
3. Roles parents play when children express feelings

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 4, "How to Listen to Your Child," pages 47-53, "Questions 1-4," "Problem Situation," and "Activity for the Week," page 54

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989), Chapter 4, "The Do's and Don't of Read Aloud," pages 79-85

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 4, "The Gift of Empathy," pages 60-78

3. Making the Grade (Black, 1989), Chapter 4, "How Home Influences School Success," pages 67-84

Week 2

Topics discussed:

1. Bonding and its effect on the values emphasized to children

2. The importance of mutual respect

3. The parent as an effective listener

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 4, "Communication: How to Listen to Your Child," pages 47-53, "Questions 5-8," page 53

Week 3

Topics discussed:

1. Fostering acceptable morals and values in our children

2. The parent as a reflective listener

Materials used:

1. Pamphlet, "Questions and Answers on Moral Education" (Ryan, 1981)

2. Book, Values (Hendrick, 1984)

3. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 4, "Communication: How to Listen to Your Child," pages 47-54, "Questions 9-12," "Effective Listening," Chart, page 55, "Communication: Listening," Chart, page 56, "My Plan for Improving Relationships," Chart, page 59

Week 4

Topics discussed:

1. Critical thinking skills
2. Self-reflection, listening to ourselves
3. Television and morals and values

Materials used:

1. Pamphlet, "Philosophy for Children: An Approach to Critical Thinking" (Johnson, 1984)
2. Pamphlet, "You, Your Children and TV" (Zeigler, 1987)
3. Activity box, "Critical Thinking" (Schaffer & Smith, 1987)

Month 5: Solving Conflict

Week 1

Topics discussed:

1. Approaching confrontation with sensitivity
2. Communication in building trust

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 5, "Communication: Exploring Alternatives and Expressing Your Ideas and Feelings to Children," pages 61-67, "Questions 1-3," "Exercise 1," page 66, "Practical Situations 1 and 2," "Problem Situation 1," "Activty for the Week," page 67

Week 2

Topics discussed:

1. Continued review of this chapter

2. The relationship of this material to children's friendships

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 5, "Communication: Exploring Alternatives and Expressing Your Ideas and Feelings to Children," pages 61-67, "Questions 4-8," page 66, "Exercise 2," page 67, "Problem Situation 2," "Activity for the Week," page 67

2. Booklet, "Children's Friendships" (West, 1985)

Week 3

Topics discussed:

1. Continued review of this chapter

2. The relationship of this material to adult relationships

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 5, "Communication: Exploring Alternatives and Expressing Your Ideas and Feelings to Children," pages 61-67," "Questions 9-11," page 66, "Problem List," "Practical Situation 3," "Problem Situation 3," page 67, "Activity for the Week" of the recovering mother's choosing

Week 4

Topics discussed:

1. The relationship of this material to problems in everyday life: job, welfare agencies

2. Conclusion of problems and exercises in this chapter

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1985), Chapter 5, "Communication: Exploring Alternatives and Expressing Your Ideas and Feelings to Children," pages 61-67, "Practical Situations 4 and 5," page 67, "Activity for the Week: How This Material has Changed My Month," discussion

Month 6: The Adolescent

Week 1

Topics discussed:

1. Child development and the life cycle, ages 12 to 14

2. Basic principles of natural and logical consequences

Materials used:

1. Chart, "Erikson's Eight Stages" (Skolnick, 1986)

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 6, "Natural and Logical Consequences: A Method of Discipline that Develops Responsibility," pages 75-86, "Questions 1, 2, 3, & 4," Practical Situations 1, 2," "Problem Situation 1," pages 85-86, "Activity for the Week" on the Mother's choosing

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989), Chapter 6, "Home and Public Libraries," pages 97-115

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 6, "The Emotional Thru: Dealing with Criticism," pages 95-123

3. Making the Grade (Black, 1989), Chapter 6, "Preparing Your Baby for School," pages 107-119

Week 2

Topics discussed:

1. Physical, mental, and social changes of Adolescences

2. Meeting the needs of the adolescent

3. The major differences between punishment and logical consequences

Materials used:

1. Pamphlet, "Adolescents" (Hamilton, 1988)

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 6, "Questions 5, 6, 7, 8, and 9," Review of "Exercise," page 85, "Practical Situations 3 and 4," "Problem Situation," page 86

3. The mothers were asked to document problem situations with their children and how they substituted logical consequences for punishment

Week 3

Topics discussed:

1. The social issues of the adolescent: dating, sex, and drugs

2. Discussion of how the application of natural and logical consequences is progressing

Materials used:

1. Pamphlet, "Drugs, Sex, and AIDS" (American Red Cross)

2. Pamphlet, "Beyond the Birds and the Bees" (Birchmayer, 1985)

3. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 6, "Points to Remember, Principles of Natural and Logical Consequences," page 89

Week 4

Topics discussed:

1. Drugs and adolescents

2. Improvement in women's relationships with their children

Materials discussed:

1. Guest speaker from a local drug prevention organization

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 6, "My Plan for Improving Relationships," page 91

Month 7: The Teenager

Week 1

Topics discussed:

1. Child development and the life cycles, ages 14 to 18

2. Applying natural and logical consequences to other concerns (clothing, hairstyles, chores, etc.)

Materials used:

1. Chart, "Erikson's Eight Stages" (Skolnick, 1986)

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 7, "Applying Natural and Logical Consequences to Other Concerns," pages 93-95, "Questions 1 and 2," "Exercise 1," page 96

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989), Chapter 7, "Television," pages 116-138

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 7, "With Heart Held High: The Right Way to Handle Teasing"

3. Making the Grade: How to Help Your Child Have a Happy and Successful School Experience (Black, 1989), Chapter 7, "Encouraging Your Unique Young Learner," pages 121-136

Week 2

Topics discussed:

1. Meeting the needs of the teenager

2. Continuation of applying natural and logical concerns to problem behavior

Materials used:

1. Pamphlet, "Teen Parent Communication" (Cherry, 1982)

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 7, "Applying Natural and Logical Consequences to Other Concerns," pages 93-95, "Exercise 2," "Practice Situations 1-4," page 96

Week 3

Topic discussed:

1. Social issues: sex, drugs, and AIDS

Materials used:

1. Pamphlet, "What Young People Should Know About AIDS" (Department of Health and Rehabilitative Services, State of Florida)

2. Pamphlet, "Piecing it Together, HIV+" (Health Councils of Pasco-Pinellas, Inc.)

3. Pamphlet, "How You Won't Get AIDS" (U.S. Center for Disease Control, Atlanta)

4. Pamphlet, "What About AIDS Testing" (U.S. Center for Disease Control, Atlanta)

5. Pamphlet, "Why You Should be Informed About AIDS" (Department of Health and Rehabilitation Services, State of Florida)

* A guest speaker from a local AIDS organization worked with the women on AIDS-related topics.

Week 4

Topics discussed:

1. School issues for parents and teenagers: getting a high school diploma in Florida, college entrance, technical training

2. Conclusion of "Applying Appropriate Consequences"

Materials used:

1. A high school guidance counselor will be the guest speaker for this class

2. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 7, "Applying Natural and Logical Consequences to Other Concerns," pages 93-96, "Problem Situations," page 96, "Activity for the Week" were determined by the mothers

Month 8: Adult Children of Addicted Parents

Week 1

Topic discussed:

1. Adult children of addicted parents. Predisposition to addictive disease, prevention, how to get help

Materials used:

1. A guest speaker from the Adult Children of Alcoholics group worked with the women on these topics

Supplemental Readings for the Month:

1. The New Read Aloud Handbook (Trelease, 1989), Chapter 8, "Sustained Silent Reading: Reading Aloud's Natural Partner," pages 139-147, Chapter 9, "How to Use the Treasury," pages 148-152

* Note: The last chapter of this book is a compilation of children's books recommended by the author. This chapter was not a suggested reading as such, but the women were encouraged to use this section when planning reading selections for their children.

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 8, "Rejection Without Pain (Almost)," pages 148-178, Chapter 9, "The Body-Image Trip," pages 179-198, Chapter 10, "The Importance of Being Imperfect," pages 199-229

3. Making the Grade (Black, 1989), Chapter 8, "School - The Child's Workplace," pages 137-155, Chapter 9, "Parents and Teachers Working Together," pages 157-176, Chapter 10, "How Childhood Stress Affects Learning," pages 177-201

Week 2

Topic discussed:

1. The family meeting

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 8, "The Family Meeting," pages 103-113, "Questions 1-6," "Problem Situation," and "Activity for the Week," page 108, Chart, "Essentials of Family Meetings," page 109, "Points to Remember," page 111, "My Plan for Improving Relationships," page 113

2. How to Give Your Child a Great Self-Image (Phillips & Bernstein, 1989), Chapter 11, "The Family Round Table," pages 220-252

Week 3

Topics discussed:

1. Developing confidence as a parent

2. Setting goals

Materials used:

1. The Systematic Training for Effective Parenting Handbook (Dinkmeyer & McKay, 1989), Chapter 9, "Developing Confidence and Using Your Potential," pages 115-124, "Questions 1-9," page 118, "Problem Situation," pages 118-119, Chart, "Democratic and Positive Parenting," page 120, "Points to Remember," Alternatives to Self-Defeating Beliefs," page 121

Week 4

Topics discussed:

1. Wrap-up of any unfinished materials or topics

2. Evaluation

Materials used:

1. Written Evaluation instrument (see Appendix B)

APPENDIX B

WRITTEN EVALUATION

WRITTEN EVALUATION

Please circle the number that appropriately reflects your opinion on the following statements.

5-Excellent 4-Very Good 3-Fair 2-Poor 1-Unacceptable

1. The topics of discussion for this course were appropriate for mothers recovering from addictive disease

   5 4 3 2 1

2. The materials (books, pamphlets, etc.) were appropriate for the.topics covered in this course.

   5 4 3 2 1

3. The activities (role playing, activity for the week, etc.) were appropriate for this course.

   5 4 3 2 1

4. The guest speakers were appropriate choices for topics included in this course.

   5 4 3 2 1

5. The group leader was knowledgeable, helpful, and encouraging in a manner appropriate for mothers recovering from addiction disease.

   5 4 3 2 1

6. Mothers in the group were given opportunities to ask questions, contribute to discussions of topics, voice opinions, and/or add to the direction of the course.

   5 4 3 2 1

7. Suggestions for improvement, additions of deletions, or for further study in a topic were incorporated.

   5 4 3 2 1

8. On a scale of 5 to 1 as a parent before the implementation of this course, I was a

   5 4 3 2 1

9. After this 8 month course on parenting, I feel that on a scale of 5 to 1, I am now a

   5 4 3 2 1

10. To make this course more meaningful:

_____

_____

_____

_____

11. The group meeting time, length of meeting and place were

_____

_____

_____

_____

12. An aspect of this course not questioned on this evaluation but should have been included is:

_____

_____

_____

_____

13. I would recommend this course to other mothers recovering from addictive disease.

   5 4 3 2 1

14. This course should be required by all recovering mothers who are seeking to reunite families separated because of addiction related problems.

   5 4 3 2 1